#### CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

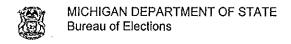
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 01/01/2015 To: 07/20/2015  Mo Day Year Mo Day Year			
1. Committee I.D. Number 150313-0 2. Committee Name Committee to Elect Joseph Rivet	4. Candidate Last Name First Name M.I.  Germittee to Elect Joseph Rivet Jos (FN  4a. Office Sought Including District # or Community Served (If applicable) To Be Determined Bay County DRAI J Commission of County of Residence Driver License # (Optional) Bay			
5. Committee's Mailing Address 2600 Center  Bay City MI 48708 Area Code and Phone (989) 671-2153  If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	6. Treasurer's Name & Residential Address  JUSTON RIVET  2GO CONTON AVE, BAY CITY, MI 48708  Area code & Phone 989. C71. 2153  Driver License # (Optional)			
7. Treasurer's Business Address  SIS CENTEL AVO.  BAY CIM, MIL 48708  Area Code and Phone	8. Designated Recordkeeper's Name and Mailing Addies (If Recommittee has a Designated Recordkeeper)  Area Code and Phone  Driven icense # (Optional)			
9. TYPE OF STATEMENT  9a.  Pre-Election OR 9b. Pos  Pre-Election or Post-Election Statement relates to:	9c. Annual Statement Soverage Year)  9d. Amendment to Campaign Statement (Complete Item 9a, 9b,			
☐ Primary ☐ Gene ☐ Convention ☐ School ☐ Special ☐ Caucit	9c or 9e to indicate which Statement is being amended)  9e. Dissolution of Candidate Committee  Effective Date of Dissolution  Cus  Mon Day Year			
Date of Election, Convention or Caucus  11/08/2016  Month Day Year	By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.			
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filling deadline of a required campaign statement, that campaign statement can not be waived.				
Verification: I certify that all reasonable diligence was used in my knowledge and belief the contents are true, accurate and the contents are true, accurate and the contents are true.	in the preparation of this statement and attached schedules (if any) and to the best of nd complete.			
Current Treasurer or Designated Recordkeeper Type or Print Name  Candidate  Candidate	Date 7 23 15    No Day Year   Date 7 23 15			
Type or Print Name	Signature Mo Day Year ority granted under P.A. 388 of 1976			

1. Committee I.D. Number	150313-0

2. Committee Name Committee to Elect Joseph Rivet

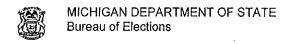
#### SUMMARY PAGE CANDIDATE COMMITTEE

RECEIPTS		Column I This Period	Column II
3. Contributions		rnis Feriod	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	4110.00	-
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	0.00	
c. Subtotal of "Contributions"	(3c.) \$	4110.00	(18.) \$6885.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	0.00	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	4110.00	(20.) \$6885.00
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	0.00	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	0.00	(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	1892.34	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	82.33	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	1974.67	(23.) \$4510.17
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	4401.1.4	0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	0.00	
(Add Line 10a + Line 10b)  DEBTS AND OBLIGATIONS	(11.) \$	0.00	(24.) \$
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	775.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	0.00	
	BALANCE	STATEMENT	
Ending Balance of last report filed     (Enter zero if no previous reports have been filed.)	(13.) \$	925.23	
4. Amount received during reporting period	(14.) +	4110.00	_
(Line 5, Total Contributions & Other Receipts)	(15.) =	5035.23	_
SUBTOTAL Add Lines 13 and 14     Amount expended during reporting period	(16.) -	1974.67	
(Add lines 9 and 11) 7. ENDING BALANCE	(17.) \$	3060.56	*



1. Committee I.D. Nu	mber	150313-0
2. Committee Name	Com	nmittee to Elect Joseph Rivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/07/2015	50.00	400.00
Name: Bob Redmond Address:201 N. Mountain	50.00	100.00
Bay City MI 48706  5. If over \$100.00 cumulative, please provide:  Occupation ANAUST Employer Bay County	;	
Business Address 515 CWTCL NO. PAY CITY MR 46708		
Type of Contribution:  Direct		
3. Contribution # 2 PAC Receipt? II YES 4. Date of Receipt 02/09/2015	20.00	50.00
Name: Nancy Carmona Address: 5757 Two Mile Rd.	30.00	50.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 3 PAC Receipt?   YES 4. Date of Receipt 02/09/2015	200.00	400.00
Name: Ron Hansen		
Address: 1615 Thunderbird		
Saginaw MI 48609 5. If over \$100.00 cumulative, please provide:		
Occupation Engineer Employer SPICSC GROUP		
Business 230 S. WASHINGTON AND SAGIMAN, MC 48407		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 4 PAC Receipt?   YES 4. Date of Receipt 02/10/2015	100.00	170.00
Name: Tom Bock	100.00	110.00
Address: 2123 Center Ave.		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation ATTORNO Employer Sty F		
Business Address 708 CENTER AVE, BAY CITY ME 48708		
Type of Contribution:   Direct    Loan from a person		
Page Subtotal	380.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
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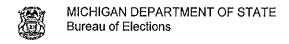
1. Committee I.D. Nun	nber	150313-0	
2. Committee Name_	Con	nmittee to Elect Joseph Rivet	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 5 PAC Receipt? ☐ YES 4. Date of Receipt 02/10/2015		
Name: Tom Herek Address: 1606 30th Street	20.00	20.00
Bay City MI 48708  5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business Address		
Type of Contribution:  Direct Loan from a person Fund Raiser		
3. Contribution # 6 PAC Receipt? ☐ YES 4. Date of Receipt 02/10/2015  Name: Bill Weber,	100.00	200.00
Address: 683 S. Linwood Beach Rd.		
Linwood MI 48634 5. If over \$100.00 cumulative, please provide:		
Occupation MOSINAI Employer SALCENT STORE DOCKS		
Business Address 5CoC N. WESTGAN FIT RD. SAGINAN 48604		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 7 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2015	20.00	40.00
Name: Brian Redmond	20.00	10.00
Address: 11 Bay Shore Drive		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 8 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2015	50.00	50.00
Name: Ken Lange Address: 383 River Drive	30.00	
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	:	
Type of Contribution:  Direct		
Type of Serminguistic Early Francisco Early		
Page Subtotal	190.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Nu	mber 150313-0
2. Committee Name	Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 9 PAC Receipt? ☐ YES 4. Date of Receipt 02/16/2015	400.00	222.00
Name: Dave Quimby Address: 12760 Whisper Ridge Circle	100.00	200.00
Freeland MI 48623		
5. If over \$100.00 cumulative, please provide:		
Occupation ACCOUNTST Employer WEINLANDER FITZ HUCK		
Business Address 1600 CWTGL AVE, BAY GM, MI 48708		
Type of Contribution:  Direct		
3. Contribution # 10 PAC Receipt? ☐ YES 4. Date of Receipt 02/18/2015	20.00	50.00
Name: Gerald Prevost		00.00
Address: 1619 Stanton		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 11 PAC Receipt?   YES 4. Date of Receipt 02/20/2015	100.00	100.00
Name: Ed Dore	100.00	100.00
Address:3095 Sherwood		
Bay City MI 48706	·	_
5. If over \$100.00 cumulative, please provide:		
Occupation PASSIDUT Employer DOAG ASSOC,		
Business Address 900 TRUMAS PARKWAY BAY CITY, MI 4818		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔟 Fund Raiser		
3. Contribution # 12 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	75.00	95.00
Name: Cheryl Ackerman	70.00	30.00
Address: 1813 33rd Street		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔟 Fund Raiser		
Page Subtotal	295.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)		



1. Committee I.D. Nur	mber150313-0
2. Committee Name_	Committee to Elect Joseph Rivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 13 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	10.00
Name: John Andress Address:1701 S. Sheridan	20.00	40.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		a .
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 14 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	50.00
Name: Mark Basket Address: 1076 W. Borton Rd.	30.00	50.00
Essexville MI 48732 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 15 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Kerice Basmadjian Address: 1301 S. Henry	30.00	30.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		•
OccupationEmployer		
Business Address		
Type of Contribution: Direct Doan from a person Double Fund Raiser		
3. Contribution # 16 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	00.00	40.00
Name: Deanne Berger Address:2235 Carroll Rd.	20.00	40.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer_		
		, l
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	100.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



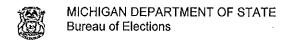
1. Committee I.D. Nun	nber _	150313-0		
2. Committee Name_	Com	mittee to Elect Jo	seph Rivet	

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3. Contribution # 17 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	100.00	200.00
Name: Tim Boutell Address:855 S. Linwood Beach		
Linwood MI 48634  5. If over \$100.00 cumulative, please provide:  Occupation 3 ROS: DWT Employer BOUTER GOTERPRISES		
Business 807 WOODLAM, BAY EITY MZ 48706		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 18 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 02/23/2015		05.00
Name: Kathy Bremer Address: 146 E. Munger Rd.	25.00	25.00
Munger MI 48747  5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business	:	
Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 19 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 02/23/2015	20.00	20.00
Name: Brunner for State Rep. Address:208 Murphy	20.00	20.00
Bay City MI 48706  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser  3. Contribution # 20 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 02/23/2015		
Name: Rick Brzezinski	20.00	40.00
Address: 2513 25th Street		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution; 🗵 Direct 🔲 Loan from a person 🖾 Fund Raiser		
Page Subtotal	165.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Nun	nber	150313-0	
2. Committee Name _	Con	mittee to Elect Joseph Rive	et

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 21 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	00.00	00.00
Name: Mike Buda Address:526 Handy Drive	20.00	20.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 22 PAC Receipt? II YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Sara Clevez Address: 1179 W. Blakely Rd.	20.00	20.00
Sanford MI 48657 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution # 23 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	30.00	50.00
Name: Jerry Crete	30.00	50.00
Address: 1604 St. Mary's Ct		
Essexville MI 48732 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 24 PAC Receipt? II YES 4. Date of Receipt 02/23/2015	100.00	200.00
Name: Chad Cunningham Address: 290 Killarney Beach	100.00	200.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	į	
Occupation MGOI DUT Employer PRIME BRUTHUS		
Business Address    500   5. EUCLID   AE   BAY CITY   ME   4970 CTY		
EN LANGE		<u></u>
Page Subtotal	170.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Number		150313-0
2. Committee Name_	Com	nmittee to Elect Joseph Rivet

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3. Contribution # 25 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Troy Cunningham Address: 5209 Prairie Creek	30.00	30.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 26 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015  Name: Nick Czerwinski	20.00	20.00
Address: 2986 Chrysler Dr.		
Bay City MI 48706  5. If over \$100.00 cumulative, please provide:  Occupation Employer	1	
Business Address	i	
Type of Contribution:  Direct Loan from a person Fund Raiser		
3. Contribution # 27 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	50,00	50.00
Name: Don David Address: 1836 McKinley	00.00	30.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 28 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	40.00	40.00
Name: Mike Denay Address:3052 W.Birch Dr.	40.00	40.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
Page Subtotal	140.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Nun	nber _	150313-0	
2. Committee Name	Com	mittee to Elect Joseph	Rivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 29 PAC Receipt? II YES 4. Date of Receipt 02/23/2015	70.00	
Name: Mary Donnelly Address:613 Green	50.00	50.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 30 PAC Receipt?   YES  4. Date of Receipt  02/23/2015	30.00	30.00
Name: Ben DuRussell Address:1404 Markel	30.00	30.00
Munger MI 48747 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		·
Business Address	:	
Type of Contribution:  Direct  Loan from a person  Fund Raiser	1	
3. Contribution # 31 PAC Receipt?   9 YES 4. Date of Receipt 02/23/2015	20.00	00.00
Name: Brian Elder	20.00	20.00
Address:900 Center		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	·	
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 32 PAC Receipt?   YES  4. Date of Receipt  02/23/2015	100.00	4.0.0
Name: Jim Fabiano Address:5816 Windy Gale	100.00	100.00
Midland MI 48640		
5. If over \$100.00 cumulative, please provide: Occupation <u>PROプログラー Employer</u> FADIANO BROTHMS		
Business 4000		
Address 1885 BEVANDA BAY CITY ME 48708		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



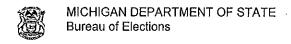
1. Committee I.D. Number		150313-0	
2. Committee Name _	Con	mittee to Elect Jos	eph Rivet

	<del></del>	
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3. Contribution # 33 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	00.00
Name: Bill Fournier Address: 1020 N. Water	20.00	20.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:	· ·	
OccupationEmployer		
Business Address	}	
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 34 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	50.00	50.00
Name: Friends of Joan Brausch Address: P.O. Box 2412	50.00	50.00
Midland MI 48641  5. If over \$100.00 cumulative, please provide:  Occupation Employer		
OccupationEmployer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🖾 Fund Raiser		
3. Contribution # 35 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	50.00	50.00
Name: Jim Gath	30.00	30.00
Address: 147 River Trail		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 36 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015		
Name: Harry Gill Address:3030 Riverview	50.00	50.00
Bay City MI 48706		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	170.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



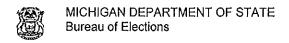
1. Committee I.D. Nur	nber _	150313-0	
2. Committee Name_	Com	nmittee to Elect Joseph R	ivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 37 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Don Good Address:714 Webb		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	3	
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 38 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	40.00	40.00
Name: Terry Gould	40.00	40.00
Address: 4299 Kuerbitz	18	
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 39 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	30.00	30.00
Name: Don Goulet Address: 69 York		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation Employer	•	
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 40 PAC Receipt?   9 YES 4. Date of Receipt 02/23/2015	30.00	60.00
Name: Mike Halstead Address:2157 Sixth Street	00.00	00.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide: OccupationEmployer	·	
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person		
Page Subtotal	120.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



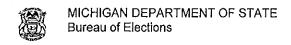
1. Committee I.D. Nui	mber _	150313-0
2. Committee Name_	Com	mittee to Elect Joseph Rivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 41 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Crystal Hebert Address:601 Glenview Ct	30.00	30.00
Pinconning MI 48650		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 42 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	F0.00	400.00
Name: Martin Hornacek Address:609 Glenview	50.00	100.00
Pinconning MI 48650		
5. If over \$100.00 cumulative, please provide:		
Occupation OWAKA Employer MONTHWOODS		;
Address 229 W. FIFTN ST. ANCUMING, MZ 48650		
Type of Contribution:  Direct		
3. Contribution # 43 PAC Receipt?   YES 4. Date of Receipt 02/23/2015		
Name: Lori Jezowski	40.00	40.00
Address:427 German Rd.		
Munger MI	,	
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
	:	·
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 44 PAC Receipt?  YES 4. Date of Receipt 02/23/2015		
Name: Tim Kelly	40.00	40.00
Address: 2152 Fifth Steet		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		•
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	160.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)		



1. Committee I.D. Nun	nber .	150313-0
2. Committee Name	Con	nmittee to Elect Joseph Rivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 45 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	25.00	25.00
Name: Brandon Krause		
Address:		
Auburn MI 48611   5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 46 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	40.00
Name: Holly Kukla	20.00	10.00
Address: 237 W. Hampton		
Essexville MI 48732 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 47 PAC Receipt? II YES 4. Date of Receipt 02/23/2015	50.00	50.00
Name: Christine Licht		
Address: 2354 S. Huron Rd.		
Kawkawlin MI 48631 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 48 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Colleen Maillette Address: 3123 Kirkwood	20.00	20.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct  Doan from a person  E Fund Raiser		
Page Subtotal	115.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
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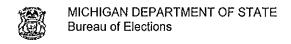
1. Committee I.D. Nur	mber _	150313-0		
2. Committee Name _	Comr	nittee to Elect	Joseph Rive	t

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 49 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Eileen Marshall Address:1316 Broadway	30.00	30.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 50 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	400.00	475.00
Name: Jeff Mayes Address: 4297 Zander	100.00	175.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Supervisor MANAGE Employer Bay County CENSUMENS POWER		
Business 515 Center Ave. 4141 WILDON Address Bay City MI 48706		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🖾 Fund Raiser		
3. Contribution # 51 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	30.00	30.00
Name: Rick Meeth Address: 2211 McKinley	30.00	30.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 52 PAC Receipt? X YES 4. Date of Receipt 02/23/2015	250.00	250.00
Name: Michigan Laborers Political L Address:1118 Centennial Way	250.00	250.00
Lansing Mi 48917 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business		
Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	410.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		·



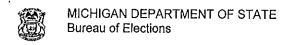
1. Committee I.D. Numb	er 150313-0
2 Committee Name (	Committee to Flect Joseph Rivet

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 53 PAC Receipt?   YES 4. Date of Receipt  02/23/2015	20.00	50.00
Name: John Miller Address: 304 Barclay	20.00	50.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🗵 Fund Raiser		
3. Contribution # 54 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Andrew Niedzinski Address:321 S. Birney	20.00	20.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 55 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	20.00	20.00
Name: Al Peloquin	20.00	20.00
Address: 216 Hart St.		
Essexville MI 48732 5. If over \$100.00 cumulative, please provide:	:	
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 56 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	50.00	80.00
Name: Barb Poirier	30.00	00.00
Address: 134 Salzburg		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	110.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



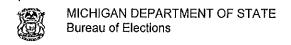
1. Committee I.D. Num	ber .	150313-0	
2. Committee Name	Con	mittee to Elect Joseph Rivet	

		·····
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 57 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	50.00	140.00
Name: Rich Putt Address:4650 S. Aubrn Rd.	50.00	110.00
Auburn MI 48611  5. If over \$100.00 cumulative, please provide:  Occupation PCT VCD Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 58 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	00.00	50.00
Name: Frank Quinn Address:4110 Creekwood	30.00	50.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	3	
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 59 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	00.00	00.00
Name: Pat Race	20.00	20.00
Address: 1004 N. Sheridan		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 60 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	05.00	05.00
Name: Jill Raynak	25.00	25.00
Address: 1004 S. Hampton St.		
By City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	ĺ	
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



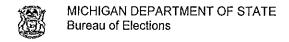
1. Committee I.D. Nur	nber _	150313-0		
2. Committee Name_	Com	mittee to Elect Jos	eph Rivet	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 61 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015		
Name: Vicki Roupe Address: 3115 Kirkwood	20.00	45.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 62 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	50.00	50.00
Name: Mike Rowley	50.00	50.00
Address: 1561 Wedgewood		
Essexville MI 48732 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Pusinasa	1	
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 63 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	40.00	40.00
Name: Tom Ryder	40.00	40.00
Address: 1300 W. Thomas		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser	i	
3. Contribution # 64 PAC Receipt?  YES 4. Date of Receipt 02/23/2015		
Name: Richard Rytlewski	20.00	20.00
Address: 311 Roberts		
Auburn MI 48611 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	130.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Nun	nber _	150313-0		
2. Committee Name _	Com	mittee to Elect	Joseph Riv	et

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 65 PAC Receipt? II YES 4. Date of Receipt 02/23/2015	50.00	100.00
Name: Jerome Sarnowski Address: 1400 S. Warner	50.00	100.00
Bay City MI 48706  5. If over \$100.00 cumulative, please provide:  OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 66 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015  Name: Don Scherzer	200.00	300.00
Address: 5470 4 mile		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation President Employer Spicer Group		
Business 230 S. Washington Address Saginaw MI 48603		
Type of Contribution:  Direct  D Loan from a person  Fund Raiser		
3. Contribution # 67 PAC Receipt?   YES  4. Date of Receipt  02/23/2015	400.00	100.00
Name: Jerome Somalski Address: 1147 N. Pine	100.00	100.00
Essexville MI 48732  5. If over \$100.00 cumulative, please provide:		
Occupation OWWW Employer Bry LAWS CAPING		
Business 1630 SE. BOUTELL RD. ESSEXVILLE, ME 48732		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 68 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	100.00	100.00
Name: Terry Spencer Address:521 Washington Ave.		
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:	i	
Occupation OWNCA Employer DUNLOPS		
Business Address  SZI WASHIJCTON RV6 1304 CITY MT 4878  Type of Contribution:   Direct   Loan from a person   Fund Raiser		
Type of Committeeton. M. Purect D. Loan Hottl & Person M. Purid Raiser		
Page Subtotal	450.00	·
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Nun	nber .	150313-0	
2. Committee Name	Con	mittee to Elect Joseph Rivet	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 69 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	00.00	20.00
Name: Jay Swaton Address:1507 Sixth Street	30.00	30.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 70 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	30.00	60.00
Name: Don Tilley Address:617 Green	30.00	60.00
Bay City MI 48708 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:  Direct	<u> </u>	
3. Contribution # 71 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015		
Name: Ben Washabaugh	50.00	80.00
Address:401 Kelton		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:	:	
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		•
3. Contribution # 72 PAC Receipt?   YES 4. Date of Receipt 02/23/2015		
Name: Jim Washabaugh	50.00	100.00
Address: 5914 4 Mile		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation SALGS Employer NORTHUN CONCRETE & PIPE		
Business 401 KECTEN BAY CITY MI 40706		
Type of Contribution:   Direct Loan from a person Fund Raiser		
Dane Outliet		
Page Subtotal	160.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		



1. Committee I.D. Number		150313-0	_
2. Committee Name _	Com	nmittee to Elect Joseph Rivet	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 73 PAC Receipt? II YES 4. Date of Receipt 02/23/2015	F0.00	450.00
Name: Tom Washabaugh Address: 232 Athlone Beach	50.00	150.00
Bay City Mi 48706 5. If over \$100.00 cumulative, please provide:		<u> </u>
Occupation Partner Employer Northern Concrete	:	
Business 401 Kelton Address Bay City MI 48706		
Type of Contribution: Direct		!
3. Contribution # 74 PAC Receipt? ☐ YES 4. Date of Receipt 02/23/2015	400.00	
Name: Bill Wentworth Address:8290 Northport	100.00	200.00
Brand Blanc MI 48439  5. If over \$100.00 cumulative, please provide:  Occupation Business Owner Employer Geoffrey Seidlein Affle LTT).		
Business -5801-W_Michigan Ave. 4448 BRISTOL RD Address Lansing MI 48917 FLINT, MI 48507		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 75 PAC Receipt?   YES 4. Date of Receipt 02/23/2015	050.00	050.00
Name: Bryan Wood Address: 1818 Wilder	250.00	250.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation Contractor Employer Lee Wood Contracting		
Business 930 N. Wagoner Address Essexville MI 48732		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 76 PAC Receipt?   9 YES 4. Date of Receipt 02/24/2015	50.00	100.00
Name: Edward Rivet Address: 3072 W. Birch Dr.		
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:		
Occupation RGTIRED Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔟 Fund Raiser		
Page Subtotal	450.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Number		150313-0	
2. Committee Name	Con	mittee to Elect Joseph Rivet	

	<del></del>		
Enter contributor's name and address. If contribution if from an individual and the amount more, enter last name, first name, middle initial. Check box to indicate if contribution is from Committee or an Independent Committee. (PAC) Report all contributions from committee amount.	om a Political	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 77 PAC Receipt? ☐ YES 4. Date of Receipt 03	/02/2015		
Name: Bill Reder Address:77 E. Midland Rd.		50.00	75.00
Auburn MI 48611 5. If over \$100.00 cumulative, please provide:			
·		•	
OccupationEmployer	<del></del>		
Business Address			
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fu	nd Raiser		
	06/2015		
Name: Rick Pabalis Address: 5431 Chistena		20.00	20.00
Bay City MI 48706 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fu	nd Raiser		
		<del></del>	

Page Subtotal

Grand Total of All Schedules 1A (Complete on last page of Schedule)

70.00

4110.00



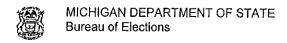
#### ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

. Committee I.D. Number	150313-0	

3. Name	and address of person o	r vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditu	ure # 1		may assign an approximate sector,	00/00/0045	120.00
Name:	Reinbold Printing		Purpose: Printing	02/06/2015	130.00
Address:	3201 Hallmark Ct				
	Saginaw	MI 48604	Expenditure Code PA		
	ougman	1911 40004	☐ Check box if this expenditure is payment		
☑ Fund F	Raiser		of debt or obligation reported on previous statement		l
Expenditu	ire # 2			02/11/2015	171.80
Name:	Postmaster ·		Purpose: Postage	02/11/2015	171.00
Address:				,	
	Bay City	MI 48708	Expenditure Code MA		
	bay ony	WII 40700	☐ Check box if this expenditure is payment	-	
☐ Fund F	Raiser		of debt or obligation reported on previous statement		
Expenditu	re # 3			00/00/0045	004.54
Name:	Stein Haus		Purpose: Fundraiser Food/drink	02/23/2015	901.54
Address:	Water Street			1	
	Bay City	MI 48708	Expenditure CodeFE		
	24, 54,	····· -70700	☐ Check box if this expenditure is payment		
☑ Fund R	taiser		of debt or obligation reported on previous statement		
Expenditur	re # 4			02/26/2045	80.00
Name:	Bay County Democra	atic Party	Purpose: Party Function	02/26/2015	80.00
Address:	4538 Greenfield				
	Bay City	MI 48706	Expenditure Code PP		
	,,	17.107.00	☐ Check box if this expenditure is payment		
☐ Fund R	aiser		of debt or obligation reported on previous statement		
Expenditur	e#5			03/18/2015	49.00
Name:	Postmaster		Purpose: Stamps	03/10/2015	49.00
Address:		•			
	Bay City	MI 48708	Expenditure Code MA		
	· <b>,</b> · · · · ·		☐ Check box if this expenditure is payment		
☐ Fund Ra	aiser		of debt or obligation reported on previous statement		
			Subtotal this p	age	1332 34

Enter this total on line 8a of Summary Page

Grand Total of all Schedules 1B (Complete on last page of Schedule)



#### ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I.D. Number 150313-0

2. Committee Name	Committee to Elect Joseph Rivet	
<del>-</del>		

3. Name	and address of person or vendor	to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expendit	ure#6		may design an Experiance occupy	00/00/0045	25.00
Name:	Brunner for State Rep.		Purpose: Tickets	03/26/2015	25.00
Address:	208 Murphy				
	Bay City M	I 48706	Expenditure CodeTC		
	•		☐ Check box if this expenditure is payment		•
☐ Fund	Raiser		of debt or obligation reported on previous statement		
Expendite	ure # 7			03/30/2015	25.00
Name:	Friends of Don Tilley		Purpose: Tickets	03/30/2015	20.00
Address:	617 Green Ave.			1	
	Bay City Mi	48708	Expenditure CodeTC	ļ	
	•		☐ Check box if this expenditure is payment		
☐ Fund i	Raiser		of debt or obligation reported on previous statement	:	
Expenditu	ıre # 8			04/08/2015	65.00
Name:	Mayor's Scholarship		Purpose: Adv.	04/06/2015	05.00
Address:	P.O. Box 628			ļ	
	Pinconning MI	48650	Expenditure Code PA		
		;	☐ Check box if this expenditure is payment		
☐ Fund F	Raiser		of debt or obligation reported on previous statement		
Expenditu	re # 9			04/18/2015	50.00
Name:	Com. to Elect Brandon Krau	ise	Purpose: Tickets	04/10/2015	30.00
Address:	655 W. River Road			}	
	Kawkawlin Mi	48631	Expenditure CodeTC		
			Check box if this expenditure is payment		
☐ Fund R	laiser		of debt or obligation reported on previous statement		
Expenditu	re#10			05/15/2015	270.00
Name:	Bay County Democratic Pari	ty	Purpose: Adv/Tickets	03/13/2013	270.00
Address:	4538 Greenfield				
	Bay City MI	48706	Expenditure Code PP		
			Check box if this expenditure is payment		
☐ Fund R	aiser		of debt or obligation reported on previous statement		
			Subtotal this p	age	435.00
			Grand Total of all Schedules	3 1B	
			(Complete on last page of Sched	ute)	]



#### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I.D. Number _	150313-0		
2. Committee Name	Committee to Elect Joseph Rivet		

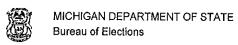
3. Name a	nd address of person or v	endor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditu	re # 11			07/17/2015	100.00
Name:	Bay County Democra	tic Party	Purpose: Party Function	0771772013	100.00
Address:	4538 Greenfield				
	Pay City	MI 4970G	Expenditure Code PP		
	Bay City	MI 48706	☐ Check box if this expenditure is payment		
☐ Fund R	aiser		of debt or obligation reported on previous statement		
Expenditu	re # 12			<u>                                     </u>	<b>^</b>
Name:	Com. to Elect John Da	avidson	Purpose: Tickets	07/19/2015	25.00
Address:	•		, 4,5000		en.
Address.			Expenditure CodeTC		
•	Bay City	MI 48708	☐ Check box if this expenditure is payment		
☐ Fund R	aiser		of debt or obligation reported on previous		
- Tollar	-		statement	<u> </u>	
		·			
					,
			·		
					j

Subtotal this page

Grand Total of all Schedules 1B (Complete on last page of Schedule)

125.00

1892.34



#### DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee I.D. Nu	mber _	150313-0	
2. Committee Name	Comn	nittee to Elect Joseph Rivet	

This Schedule itemizes:	<u> </u>			
a. Debis and obligations owed by or forgiven the	committee OR b. 🛘	Debts and obligations ov	wed to or forgiven b	v the committee.
	eck either a or b. Use only for the p			<u>y 11</u> 10 001111
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative payment to date on debt	9.Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes	4. Type: Loan	\$	0.00	500.00
Owed to or by: Joseph Rivet	Code	\$		
·	5. Date Debt Was Incurred:	\$		,
2600 Center Ave.	05/10/2010 6. Original Amount of Debt:	\$	<u> </u>	<b>_</b>
	\$500.00	\$	:	FORGIVEN
Bay City MI 48708 If bank loan, name of endorser or guarantor:		1	1	
in bank loan, name of endorser of guarantor.		An	nount Endorsed: \$	
Debt # 2 Corp? ☐ Yes	4. Type: Loan	<u> </u>	0.00	275.00
Owed to or by: Joseph Rivet	Code	<u> </u>		
2600 Center Ave.	5. Date Debt Was Incurred:	\$		
2000 Center Ave.	07/01/2012 6. Original Amount of Debt:	\$		☐ FORGIVEN
Bay City MI 48708	\$ <u>275.00</u>	\$		E LOUGIAGIA
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt # Corp? ☐ Yes Owed to or by:	4. Туре:	\$		
0.100.100.100	Code	<u> </u>		
	5. <u>Date Debt Was Incurred:</u>	<u> </u>		
	6. Original Amount of Debt:	\$		☐ FORGIVEN
	\$	\$		
If bank loan, name of endorser or guarantor: Amount Endorsed: \$				
		Page Subtotal (Outstanding	g debt) · ʃ	

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Page 1 of 1

Authority granted under P.A. 388 of 1976

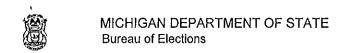
CFR REV 7/1999c-1e

(Complete on last page of Schedule showing amounts owed by or to the committee.)

Grand Total of all Schedules 1E

775.00 775.00

Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page



#### FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number	r150313-0
A A	Committee to Flect Joseph Rivet

	- USE A SEPARATE	SHEET FOR EACH EVENT	-	
3. Date Event Was Held	Number of Individuals Attendi or Participating (whichever is greater)	ng 5.Type of Fund Raising Activ	vity 6. Address and Name (If any) of the place where the activity was held Stein House - 1108 N. Water	
<u>02/23/2015</u> Month Day Year	75	Pizza Party 2015	Bay City MI 48708  □ Private Residence	
7. Total Contributions of \$20.00	or less	440.00	<i>,</i> -	
8. Total Contributions of \$20.01	or more	3610.00	-	
9. SUBTOTAL (Add lines 7 and	l 8)	4050.00		
10. Other Receipts		0.00		
11. Gross Receipts (Add lines 9	and 10)	4050.00		
12. Total Cost of Event*		1203.34	*Includes In-Kind Contributions and Al Expenditures Made For the Event	
13. □ Check if event was a joint	fund raiser and complete the	ne following:		
Co-Sponsor(s)	Contributi (%)		Expenditure Split (%)	
	<del> </del>			
			•	
			· .	
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	4m			

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions
  Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary
  Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.